



Supervising Healthcare Services: Improving the Performance of People

Course Notebook
for Trainers

JHPIEGO An Affiliate of
Johns Hopkins
University

WORKING TO IMPROVE THE HEALTH OF WOMEN AND FAMILIES THROUGHOUT THE WORLD

JHPIEGO, an affiliate of Johns Hopkins University, builds global and local partnerships to enhance the quality of health care services for women and families around the world. JHPIEGO is a global leader in the creation of innovative and effective approaches to developing human resources for health.

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SUPERVISING HEALTHCARE SERVICES: IMPROVING THE PERFORMANCE OF PEOPLE

COURSE NOTEBOOK FOR TRAINERS

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OVERVIEW

Training interventions to improve worker performance are among the most important aspects in the development of human resources. Healthcare providers must have the knowledge, attitudes, and skills required to perform their jobs in a competent and caring manner. Training deals primarily with making sure that learners acquire the knowledge, attitudes, and skills needed to carry out specific procedures or activities (such as antenatal care, infection prevention and control, or counseling for voluntary HIV testing) and helping learners apply this procedure or activity on the job. The goal of training is to assist healthcare workers in learning to support and provide safe, high-quality reproductive health services through improved work performance.

COMPETENCY-BASED TRAINING

This training course for supervisors is designed to enable learners to immediately apply, on the job, the new information and skill(s) they have learned, and thus improve their performance. The course uses a competency-based learning approach that focuses on the specific knowledge, attitudes, and skills needed to carry out a procedure or activity. Competency-based learning is learning by doing—learning that emphasizes how the learner performs (i.e., a combination of knowledge, attitudes, and most important, skills). The trainer assesses learners' skill competency by evaluating their overall performance.

Learning to perform a skill occurs in three stages:

Skill acquisition: The learner knows the steps and their sequence (if necessary) to perform the required skill or activity but needs assistance

Skill competency: The learner knows the steps and their sequence (if necessary) and can perform the required skill or activity

Skill proficiency: The learner knows the steps and their sequence (if necessary) and efficiently performs the required skill or activity

In the first stage, skill acquisition, learners attend a series of interactive and participatory sessions conducted by the trainer. The trainer involves the learners through a variety of learning methods including the use of questions, role plays, case studies, and problem-solving activities. In addition, the trainer demonstrates skills through role plays and with anatomic models or in simulations as learners observe and follow the steps in a competency-based learning guide (see below). As learners practice these skills, the trainer observes, provides feedback,

and encourages the learners to assess each other using the learning guide. Learners practice until they achieve skill competency and feel confident performing the procedure. The final stage, skill proficiency, occurs only with repeated practice over time.

ASSESSMENT OF KNOWLEDGE AND SKILLS

Assessment of learners' knowledge and skills is an essential component of training and learning interventions. Learners should be aware of how and when they will be assessed. Assessment of their knowledge and skill performance should be made throughout the course using objective assessment methods, described below.

- Knowledge assessment occurs with the administration of a precourse questionnaire on the first day of the course. Learners score their own questionnaire because the purpose is to help them see the important content areas of the course.
- The trainer gives a postcourse questionnaire at the point during the course when all of the knowledge content has been presented. Learners must achieve a score of at least 85% to demonstrate that they have achieved the learning objectives. The trainer gives learners who did not achieve a score of at least 85% correct another opportunity to study and answer the items they missed.

This means that learners know, from the beginning of the course, the basis on which the trainer will assess their competency. Assessment of learning in competency-based training is

- dynamic, because learners receive continual feedback and have ample opportunity for review and discussion with the trainer; and
- less stressful, because learners know from the beginning what they are expected to learn.

This interactive approach is the essence of competency-based training—and it is distinctly different from traditional training. In competency-based training, the learner is an active participant in the learning process. The trainer acts as a coach and is also actively involved in transferring new knowledge, attitudes, and skills through demonstration and regular feedback:

- Before skills practice—The trainer and learners meet briefly before each practice session to review the skill/activity, including the steps or tasks that will be emphasized during the session.

- During skills practice—The trainer observes, coaches, and provides feedback to the learner as s/he performs the steps or tasks outlined in the learning guide.
- After skills practice—Immediately after practice, the trainer uses the learning guide to discuss the strengths of the learner’s performance and also offer specific suggestions for improvement.

A SUPPORTIVE ENVIRONMENT FOR LEARNING

Competency-based training is most effective when there is a supportive environment at the learner’s workplace. In addition to the healthcare worker who attends the course and the trainer who conducts it, supervisors and co-workers play a critical role in helping create and maintain this environment. All of these individuals have responsibilities before, during, and after a training course. By working as partners, they can help sustain the knowledge and skills learned during training and, ultimately, the quality of clinical services. This process is called “transfer of learning.” It is described in the next section.

TRANSFER OF LEARNING ¹

Transfer of learning is defined as *ensuring the knowledge and skills acquired during a learning intervention are applied on the job.*

The clinical knowledge and skills of providers are a critical factor in providing high-quality healthcare services. However, providers may acquire new knowledge and skills only to find that they are unable to use, or transfer, these new skills at their workplace. There are several inter-related factors that support good performance in the workplace, as described below.

¹ Adapted from: PRIME II and JHPIEGO Corporation. 2002. *Transfer of Learning: A Guide for Strengthening the Performance of Health Care Workers*. Intrah: Chapel Hill, NC.

THE PERFORMANCE FACTORS	POSSIBLE INTERVENTIONS
1. Job expectations <i>Do providers know what they are supposed to do?</i>	Provide adequate performance standards and detailed job descriptions Create the necessary channels to communicate job roles and responsibilities effectively
2. Performance feedback <i>Do providers know how well they are doing?</i>	Offer timely, constructive, and comprehensive information about how well performance is meeting expectations
3. Physical environment and tools <i>What is the work environment like, and what systems are in place to support it?</i>	Develop logistical and maintenance systems to provide a satisfactory physical environment and maintain adequate supplies and equipment Design work space to suit activities
4. Motivation <i>Do people have a reason to perform as they are asked to perform? Does anyone notice?</i>	Seek provider input to identify incentives for good performance Provide positive consequences for good performance and neutral or negative consequences for below standard performance Encourage co-workers to support new skills
5. Skills and knowledge to do the job <i>Do providers know how to do the job?</i>	Ensure job candidates have prerequisite skills Provide access to trainers and information resources Offer appropriate learning opportunities

The final factor on the list, required knowledge and skills, is addressed primarily through training and learning interventions. Transfer of learning to the workplace is critical to improving job performance. The key individuals involved in this process include:

Supervisors. Responsible for monitoring and maintaining the quality of services and ensuring healthcare workers are properly supported in the workplace.

Trainers. Responsible for helping healthcare workers acquire the necessary knowledge and skills to perform well on the job.

Healthcare workers. Responsible for the delivery of high-quality services (e.g., clinicians, counselors, administrators, cleaners).

Co-workers. Responsible for supporting learners while they are engaged in training and as they apply new knowledge and skills at the workplace.

The “transfer of learning” process describes the tasks that supervisors, trainers, learners, and co-workers undertake before, during, and after training in order to assure transfer of knowledge and skills to the workplace. The goal is for learners to transfer 100% of their new knowledge and skills to their jobs. The following matrix outlines these

specific tasks. The tasks that trainers and learners should do during the learning experience appear **in bold** in the matrix.

TRANSFER OF LEARNING MATRIX

	Before Learning	During Learning	After Learning
Supervisors	<ul style="list-style-type: none"> Understand the performance need Participate in any additional assessments required for training Influence selection of learners Communicate with trainers about the learning intervention Help learners create a preliminary action plan Support and encourage learners 	<ul style="list-style-type: none"> Participate in or observe training Protect learners from interruptions Plan post-training debriefing Provide supplies and space and schedule opportunities for learners to practice 	<ul style="list-style-type: none"> Monitor progress of action plans with learners and revise as needed Conduct post-training debriefing with learners and co-workers Be a coach and role model—provide encouragement and feedback Evaluate learners' performance Stay in contact with trainers
Trainers	<ul style="list-style-type: none"> Validate and supplement the results of the performance needs assessment Use instructional design and learning principles to develop or adapt the course Send the course syllabus, objectives and pre-course learning activities in advance 	<ul style="list-style-type: none"> Provide work-related exercises and appropriate job aids Give immediate and clear feedback Help learners develop realistic action plans Conduct training evaluations 	<ul style="list-style-type: none"> Conduct follow-up activities in a timely manner Help strengthen supervisors' skills Facilitate review of action plans with supervisors and learners Share observations with supervisors and learners Maintain communication with supervisors and learners
Learners	<ul style="list-style-type: none"> Participate in needs assessments and planning Review course objectives and expectations and prepare preliminary action plans Begin establishing a support network Complete pre-course learning activities 	<ul style="list-style-type: none"> Participate actively in the course Develop realistic action plans for transferring learning 	<ul style="list-style-type: none"> Meet with supervisor to review action plan Apply new skills and implement action plan Use job aids Network with other learners and trainers for support Monitor your own performance
Co-workers and others	<ul style="list-style-type: none"> Participate in needs assessments and discussions of the training's intended impact Ask learners to bring back key learning points to share with the work group 	<ul style="list-style-type: none"> Complete learners' reassigned work duties Participate in learning exercises at the request of learners 	<ul style="list-style-type: none"> Be supportive of learners' accomplishments

As outlined in the matrix, transfer of learning is a complex process. An action plan can help make the process easier for all of the individuals involved. An action plan is a written document that describes the steps that supervisors, trainers, learners, and co-workers will complete to help maximize the transfer of learning.

An action plan should be initiated before the training intervention so that everyone who can support the transfer of learning is involved from the beginning. The learners refine their plan during the training course and usually do not complete it until after the course when they are using their new skills on the job. The content and layout of an action plan should support the users of the plan, especially the learners. In developing an action plan, keep in mind these important points:

- Write activities as discrete steps that are realistic, measurable, and attainable.
- Identify clear responsibilities for learners, supervisors, co-workers, and trainers.
- Develop a specific time schedule for completing activities.
- Identify resources necessary to complete the activities, including plans for acquiring those resources.
- Instruct learners to use a learning journal to help facilitate the development of an action plan. A learning journal is a notebook in which learners document issues, problems, additional skills they need to develop, and questions that arise as they apply their new knowledge and skills on the job.

Developing an action plan should be included in the training course. If it is not, however, learners can take the initiative to develop an action plan on their own. See page 7 for a sample of a completed action plan. This example is very detailed. This level of detail may not always be necessary, depending on the performance problem and the learning intervention being undertaken.

A blank action plan format can be found on page 9. Learners may copy this for their use or develop their own format.

EXAMPLE OF A COMPLETED ACTION PLAN

Action Plan Goal: Implementation of the New National Guidelines for Essential Maternal and Neonatal Care (EMNC)

Facility: Mercy Hospital

ACTIVITY	WHO DOES IT?	RESOURCES NEEDED	DATE NEEDED	HOW TO MONITOR THE ACTIVITY	RESULT AND HOW TO MEASURE
Acquire sufficient quantities of the service delivery guidelines to serve the needs of the facility.	Sister-in-charge	Copies of the service provision guidelines	31 March 2004	Copies of the service provision guidelines are available and used by all staff.	By December 2004, 90% of doctors and nurses will be providing EMNC services according to new national service provision guidelines. Observe clinical practice in comparison with clinical protocols.
Participate in the Orientation Seminar of the District Health Management Team (DHMT).	Sister-in-charge and senior nurse/midwife	Transport and daily expenses	21 April 2004	Sister-in-charge demonstrates familiarity with contents of service provision guidelines by conducting an accurate staff orientation.	
Conduct orientation of all staff from the Maternity Ward.	Sister-in-charge and senior nurse/midwife	Copies of the service provision guidelines	31 May 2004	Staff demonstrates familiarity with contents of service provision guidelines through participatory discussion led by sister-in-charge.	
Form Job Aids Committee.	Senior nurse/midwife	None	31 May 2004	Committee exists and is creating job aids.	
Have Job Aids Committee review guidelines and identify clinical protocols to post on the walls of the Maternity Ward.	Senior nurse/midwife	Copies of the service provision guidelines, pen and paper	15 June 2004	Observe minutes of the meeting.	
Make enlarged photocopies of the selected clinical protocols.	Job Aids Committee representative	Transport and funds to make photocopies	21 June 2004	Photocopies exist.	
Post clinical protocols on the walls and show to staff.	Job Aids Committee representative	Tape	30 June 2004	Observe that protocols are posted on the walls and referred to on a regular basis.	

EXAMPLE OF A BLANK ACTION PLAN

Performance Gap Addressed: _____

Action Plan Goal: _____

Facility: _____

ACTIVITY	WHO DOES IT?	RESOURCES NEEDED	DATE NEEDED	HOW TO MONITOR THE ACTIVITY	RESULT AND HOW TO MEASURE

INTRODUCTION

COURSE DESIGN

The “Supervising Healthcare Services: Improving the Performance of People” course is designed to help supervisors of healthcare services improve the performance of the healthcare delivery system to ensure the provision of high-quality services. The course builds on each participant’s past knowledge and takes advantage of the individual’s high motivation to accomplish the learning tasks in the minimum time. Training emphasizes **doing**, not just knowing, and uses **competency-based evaluation** of performance, relying heavily on **followup** of participants at their place of work.

The development of a healthcare services supervisor has three components:

- **Clinical knowledge and skills update.** The healthcare services supervisor should have up-to-date knowledge about the services available at the healthcare delivery site. When appropriate, the supervisor should also be competent at providing these services. This knowledge and skills update should take place before the supervisor attends this supervision course, and is not necessarily offered in conjunction with this course.
- **Development of essential supervision skills.** This supervision course includes opportunities to practice essential supervision skills.
- **Application of supervision skills on the job.** The supervisor will return to the healthcare delivery site to apply the knowledge and skills acquired during this supervision course and receive followup visits by the trainer.

There is a **model course schedule** provided in this handbook. The design of the model course schedule is based on the assumption that those attending the course are healthcare services supervisors who have had their knowledge and skills updated. The model **course outline** in the trainer’s notebook describes how to conduct each session appearing in the course schedule.

- During the morning of the first day of the course, participants demonstrate their knowledge of supervision by completing a written test (**Precourse Questionnaire**).
- Classroom sessions focus on key aspects of supervision.

- Progress in knowledge-based learning is measured at the end of the course using a standardized written assessment (**Postcourse Questionnaire**).
- Progress in learning supervision skills, such as setting performance standards for a healthcare delivery facility and conducting a supervisory assessment, is documented through trainer observations.

It is recommended that the trainer, in facilitating this supervision course, frame the course around other ongoing interventions. This means that supervision training should not be taught as a stand-alone subject. Supervision training has been found to be much more effective if placed within the context of an area in the clinic that needs improvement, such as infection prevention—a cross-cutting area for strengthening in many healthcare facilities. Experience has shown that this kind of linkage provides a valuable opportunity for supervisors to return to the worksite and immediately “try out” their new skills, applying them to subjects in which they have recently been updated. This practice also allows for reinforcement of the skills, which in time can be easily transferred to the whole clinic.

EVALUATION

This course is designed to produce competent supervisors of healthcare services. Qualification as a supervisor usually is attained through successful completion of the course, followed by one or more site visits by the trainer.

Qualification is a statement by the training organization that the participant has met the requirements of the course in knowledge, skills, and practice. Qualification does **not** imply certification. Personnel can be certified only by an authorized organization or agency.

Qualification is based on the participant’s achievement in three areas:

- **Knowledge**—A score of at least 85% on the Postcourse Questionnaire
- **Skills**—Satisfactory performance of essential supervision skills
- **Practice**—Demonstrated ability to supervise healthcare services

Responsibility for each participant’s becoming qualified is shared by the participant and the trainer. Therefore, from the outset, the trainer must be committed to following up on participants’ performance to help facilitate the transfer of training.

The evaluation methods used in the course are described briefly below:

- **Postcourse Questionnaire.** This knowledge assessment will be given at the time in the course when all subject areas have been presented. A score of 85 percent or more correct indicates knowledge-based mastery of the material presented in the reference manual. For participants scoring less than 85 percent on their first attempt, the trainer should review the results with each participant individually and provide guidance on using the reference manual to learn the required information. Participants scoring less than 85% can take the Postcourse Questionnaire again.
- **Skills.** Satisfactory performance of essential supervision skills observed during the course.
- **Practice.** Demonstrated ability to supervise healthcare services. Following the supervision course, the trainer will visit the supervisor to observe, coach, and assist the supervisor.

COURSE SYLLABUS

Course Description

This 5-day training will focus on essential supervision skills for the healthcare services supervisor. Topics presented include an introduction to supervision, defining desired performance, assessing performance, finding the root causes of performance gaps, selecting and implementing interventions, monitoring and evaluating performance, and working with people.

Course Goal

To prepare healthcare services supervisors to improve the performance of the healthcare delivery system and to ensure the provision of high-quality services.

Participant Learning Objectives

By the end of the training course, the participant will be able to:

1. Define the role of the supervisor in the performance and quality improvement process
2. Define desired performance for a healthcare delivery site
3. Assess performance
4. Find root causes of performance gaps

5. Select and implement appropriate interventions to improve performance
6. Monitor and evaluate performance
7. Work with people effectively

Training/Learning Methods

- Illustrated lectures and group discussions
- Individual and group exercises
- Role plays
- Guided practice activities in supervision skills, with feedback from participants and trainers

Learning Materials. This course handbook is designed to be used with the following materials:

- Reference manual: *Supervising Healthcare Services: Improving the Performance of People* (JHPIEGO)
- The national service delivery guidelines for the country in which the course is being conducted (one copy for every four participants)
- Sample job descriptions from the country in which the course is being conducted
- International guidelines: *Managing Complications in Pregnancy and Childbirth: A Guide for Midwives and Doctors* (World Health Organization) or other international guidelines that may be appropriate (one copy to share, if available)

Participant Selection Criteria

Participants for this course should be supervisors of healthcare services. In addition, they should be currently supervising services in a healthcare site.

Participant Precourse Assignment

Participants should be sent a letter inviting them to attend the course. Based on discussions with their supervisor, they should bring the following with them to the course:

- A list of areas that work well within their facility, as well as a list of areas where there are problems or where improvements could be made (e.g., quality of services provided, logistics management, feedback from the community)
- A copy of their job description (if available)
- Facility or clinic guidelines or standards (if available)
- A list of action plan steps the participant and her or his supervisor would like to see implemented based upon the knowledge and skills acquired in this course

Methods of Evaluation

Participant

- Pre- and Postcourse Questionnaires
- Action Plan and followup of supervisor by the trainer

Course

- Course Evaluation (to be completed by each participant)

Course Duration

- 10 sessions in a 5-day sequence

Suggested Course Composition

- Up to 20 healthcare supervisors
- 2 trainers of supervisors

MODEL COURSE SCHEDULE FOR SUPERVISING HEALTHCARE SERVICES: IMPROVING THE PERFORMANCE OF PEOPLE (5 days, 10 sessions)				
DAY 1	DAY 2	DAY 3	DAY 4	DAY 5
<p>A.M.</p> <p>Opening: Welcome and introductions</p> <p>Overview of the course (goals, objectives, schedule)</p> <p>Review course materials</p> <p>Identify participant expectations</p> <p>Precourse questionnaire</p> <p>Identify group and individual learning needs</p> <p>Activity: What works and what does not</p>	<p>A.M.</p> <p>Agenda and opening activity</p> <p>Chapter 2: Defining Desired Performance: Setting performance standards</p> <p>Activity: Create a shared vision</p> <p>Activity: Setting performance standards for something familiar to the participants (e.g., taxi, bus, market)</p> <p>Activity: Setting performance standards for a healthcare facility</p>	<p>A.M.</p> <p>Agenda and opening activity</p> <p>Chapter 4: Finding Root Causes: Finding causes of poor performance</p> <p>Discussion: Why-Why Diagrams</p> <p>Chapter 5: Selecting and Implementing Interventions This time is devoted to learning about specific interventions appropriate for those attending this course; examples include clinical, learning, transfer of training, motivational, logistic, leadership, environmental, communications, and management interventions</p>	<p>A.M.</p> <p>Agenda and opening activity</p> <p>Chapter 7: Working with People</p> <ul style="list-style-type: none"> • Communication skills • Facilitating teamwork • Planning and facilitating productive meetings • Coordinating with multiple stakeholders <p>Activity: Role play demonstration: managing meetings</p>	<p>A.M.</p> <p>Agenda and opening activity</p> <p>Activity: Complete and share a personal action plan</p>
LUNCH	LUNCH	LUNCH	LUNCH	LUNCH
<p>P.M.</p> <p>Chapter 1: Introduction to Supervising Healthcare Services</p> <ul style="list-style-type: none"> • What is supervision? • Who is a supervisor? • Supervisor responsibilities • Supervision for performance improvement and improvement in the quality of services • The performance improvement process <p>Review of the day's activities</p> <p>Assignment: Chapters 1–3</p>	<p>P.M.</p> <p>Activity: Presentation of standards</p> <p>Chapter 3: Assessing Performance</p> <ul style="list-style-type: none"> • What to assess • How to assess (self-assessment, peer assessment, supervisory assessment, client feedback, community perceptions, records and reports, comparing your services with others) <p>Activity: Assessment role play</p> <p>Review of the day's activities</p> <p>Assignment: Chapters 4–6</p>	<p>P.M.</p> <p>Chapter 5: Selecting and Implementing Interventions (continued)</p> <p>Chapter 6: Monitoring and Evaluating Performance</p> <ul style="list-style-type: none"> • Monitoring and evaluation • Tools for monitoring and evaluating <p>Review of the day's activities</p> <p>Assignment: Chapter 7</p>	<p>P.M.</p> <p>Activity: Postcourse Questionnaire</p> <p>Activity: Develop a personal action plan</p> <p>Review of the day's activities</p> <p>Assignment: Continue developing action plan</p>	<p>P.M.</p> <p>Course Summary</p> <p>Course Evaluation</p> <p>Closing Ceremony</p>

PRECOURSE QUESTIONNAIRE

HOW THE RESULTS WILL BE USED

The main objective of the **Precourse Questionnaire** is to assist both the **trainer** and the **participant** as they begin their work together in the course by assessing what the participants, individually and as a group, know about the course topics. This allows the trainer to identify topics that may need additional emphasis during the course. Providing the results of the precourse assessment to the participants enables them to focus on their individual learning needs. In addition, the questions alert participants to the content that will be presented in the course.

The questions are presented in the true-false format. A special form, the **Individual and Group Assessment Matrix**, is provided to record the scores of all course participants. Using this form, the trainer and participants can quickly chart the number of correct answers for each of the questions. By examining the data in the matrix, the group members can easily determine their collective strengths and weaknesses and jointly plan with the trainer how to best use the course time to achieve the desired learning objectives.

For the trainer, the questionnaire results will identify particular topics which may need additional emphasis during the learning sessions. Conversely, for those categories where 85 percent or more of participants answer the questions correctly, the trainer may elect to use some of the allotted time for other purposes.

For the participants, the learning objective(s) related to each question and the corresponding chapter(s) in the reference manual are noted beside the answer column. To make the best use of the limited course time, participants are encouraged to address their individual learning needs by studying the designated chapter(s).

PRECOURSE QUESTIONNAIRE/ANSWER SHEET

Instructions: In the space provided, print a capital **T** if the statement is **true** or a capital **F** if the statement is **false**.

INTRODUCTION TO SUPERVISING HEALTHCARE SERVICES

- | | | |
|--|-------|--|
| 1. Supervision can be conducted internally by an on-site supervisor and externally through supervisory visits. | _____ | Participant Objective 1
(Chapter 1) |
| 2. Healthcare supervisors work only at the district or regional levels. | _____ | Participant Objective 1
(Chapter 1) |
| 3. Although healthcare supervisors should work to improve the quality of services, they should avoid giving feedback to staff about their performance. | _____ | Participant Objective 1
(Chapter 1) |
| 4. The goal of supervision for improvement of performance and the quality of services is the provision of high-quality services. | _____ | Participant Objective 1
(Chapter 1) |
| 5. The first step in the performance improvement process is to create a shared vision with stakeholders. | _____ | Participant Objective 1
(Chapter 1) |

DEFINING DESIRED PERFORMANCE

- | | | |
|---|-------|--|
| 6. The primary purpose of a vision statement is to make sure all team members are working toward a common goal. | _____ | Participant Objective 2
(Chapter 2) |
| 7. The supervisor is responsible for writing all of the performance standards for the facility. | _____ | Participant Objective 2
(Chapter 2) |
| 8. Job descriptions can be used to set performance standards. | _____ | Participant Objective 2
(Chapter 2) |
| 9. Standards must be flexible. | _____ | Participant Objective 2
(Chapter 2) |
| 10. "A clean surface must be available for the birth of a baby" is an example of a performance standard. | _____ | Participant Objective 2
(Chapter 2) |

ASSESSING PERFORMANCE

- | | | |
|--|-------|--|
| 11. To find out how your clinic is doing, you need to periodically assess various areas within the facility. | _____ | Participant Objective 3
(Chapter 3) |
| 12. Asking a colleague to evaluate your performance is known as a self-assessment. | _____ | Participant Objective 3
(Chapter 3) |
| 13. Asking what community members think of or need from your clinic is a method of facility assessment. | _____ | Participant Objective 3
(Chapter 3) |

- | | | |
|---|-------|--|
| 14. Clients' feedback on facility performance is not as important as other feedback because they often have no choice but to visit your facility. | _____ | Participant Objective 3
(Chapter 3) |
| 15. Supervisors should avoid reviewing case records for information because this will often upset the staff members who completed the record. | _____ | Participant Objective 3
(Chapter 3) |

FINDING ROOT CAUSES

- | | | |
|--|-------|--|
| 16. Root cause analysis is used to determine how individuals are performing. | _____ | Participant Objective 4
(Chapter 4) |
| 17. One approach for identifying the causes of performance problems is to use the why-why method. | _____ | Participant Objective 4
(Chapter 4) |
| 18. One of the key factors that affects performance is job expectations. | _____ | Participant Objective 4
(Chapter 4) |
| 19. Because worker motivation is personal, the supervisor should not consider this as a factor that affects worker performance. | _____ | Participant Objective 4
(Chapter 4) |

SELECTING AND IMPLEMENTING INTERVENTIONS

- | | | |
|---|-------|--|
| 20. Interventions are designed to "close" the performance gap and improve the quality of services. | _____ | Participant Objective 5
(Chapter 5) |
| 21. Using a checklist to assess worker performance is an example of an intervention to improve knowledge and skills. | _____ | Participant Objective 5
(Chapter 5) |
| 22. Posting client satisfaction data is an example of an intervention you can use to provide feedback on performance. | _____ | Participant Objective 5
(Chapter 5) |
| 23. In the selection of interventions to improve performance, the focus should be only on what doesn't work. | _____ | Participant Objective 5
(Chapter 5) |
| 24. Cultural acceptability is one consideration when you are selecting an intervention to improve performance. | _____ | Participant Objective 5
(Chapter 5) |
| 25. An action plan is a tool you can use when planning an intervention. | _____ | Participant Objective 5
(Chapter 5) |
| 26. The question of how interventions will be paid for is not a consideration. | _____ | Participant Objective 5
(Chapter 5) |
| 27. People always act positively to change that may result from performance improvement interventions. | _____ | Participant Objective 5
(Chapter 5) |

MONITORING AND EVALUATING PERFORMANCE

- | | | |
|--|-------|--|
| 28. It is important to know if the performance improvement interventions being implemented are producing the intended results. | _____ | Participant Objective 6
(Chapter 6) |
| 29. Monitoring and evaluation activities always require elaborate study designs. | _____ | Participant Objective 6
(Chapter 6) |
| 30. Evaluation refers to how much things have changed due to implementing interventions. | _____ | Participant Objective 6
(Chapter 6) |
| 31. Obtaining client feedback is a method you can use as a monitoring tool. | _____ | Participant Objective 6
(Chapter 6) |
| 32. Comparing your facility with others is not considered a monitoring and evaluation tool. | _____ | Participant Objective 6
(Chapter 6) |
| 33. Monitoring should be started when you are identifying performance gaps, and should occur on an ongoing basis. | _____ | Participant Objective 6
(Chapter 6) |
| 34. Monitoring and evaluation are a natural part of a continual process for improving performance and quality at a healthcare delivery facility. | _____ | Participant Objective 6
(Chapter 6) |

WORKING WITH PEOPLE

- | | | |
|--|-------|--|
| 35. All staff members should be free to express and explain their views and should be encouraged to do so. | _____ | Participant Objective 7
(Chapter 7) |
| 36. In terms of developing a team, the larger the team the better. | _____ | Participant Objective 7
(Chapter 7) |
| 37. You are conducting a meeting with some of your staff. The first thing to ask is, "What would you like to talk about during the meeting?" | _____ | Participant Objective 7
(Chapter 7) |
| 38. Community members are considered healthcare facility stakeholders. | _____ | Participant Objective 7
(Chapter 7) |
| 39. As a supervisor, you are responsible for making all of the decisions and should avoid negotiating with staff. | _____ | Participant Objective 7
(Chapter 7) |
| 40. There is nothing the supervisor can do to decrease healthcare workers' resistance to change. | _____ | Participant Objective 7
(Chapter 7) |

SUPERVISING HEALTHCARE SERVICES: IMPROVING THE PERFORMANCE OF PEOPLE

INDIVIDUAL AND GROUP ASSESSMENT MATRIX

COURSE: _____ **DATES:** _____ **TRAINER(S):** _____

Question Number	CORRECT ANSWERS (Participants)																								CATEGORIES	
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24		
1																										INTRODUCTION TO SUPERVISING HEALTHCARE SERVICES
2																										
3																										
4																										
5																										
6																										DEFINING DESIRED PERFORMANCE
7																										
8																										
9																										
10																										
11																										ASSESSING PERFORMANCE
12																										
13																										
14																										
15																										

Question Number	CORRECT ANSWERS (Participants)																								CATEGORIES
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	
16																									FINDING ROOT CAUSES
17																									
18																									
19																									
20																									SELECTING AND IMPLEMENTING INTERVENTIONS
21																									
22																									
23																									
24																									
25																									
26																									
27																									
28																									MONITORING AND EVALUATING PERFORMANCE
29																									
30																									
31																									
32																									
33																									
34																									

Question Number	CORRECT ANSWERS (Participants)																								CATEGORIES
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	
35																									WORKING WITH PEOPLE
36																									
37																									
38																									
39																									
40																									

LEARNING EXERCISES

INTRODUCTION

Learning exercises, including case studies and role plays, focus on different areas of knowledge and skill development. Exercises can include directions for activities, problems to solve, and the like. Case studies emphasize knowledge, while role plays develop behaviors. Both, however, provide participants with the opportunity to safely explore options and develop their problem-solving skills. Few trainers need to be convinced of their value as training tools. Nevertheless, case studies and role plays are often under- or inappropriately used. Learning exercises:

- must be based on clear learning objectives,
- often require participants to have some prior knowledge of or previous experience with the situation presented,
- allow participants to share experiences and learn from one another,
- require the trainer to carefully monitor both content and group process within each small group as the groups work to solve the problem presented, and
- must be thoroughly discussed to maximize learning and impact.

During practice, attention should be given to:

- giving clear, complete instructions for the activity;
- monitoring the small groups as they work; and
- ensuring adequate sharing among groups, not only of their answers but also of how they arrived at those answers.

Once participants become more comfortable using exercises, case studies, and role plays, they will realize that case studies and role plays are not only excellent training tools, but are also a lot of fun!

EXERCISE 1

CASE STUDY: WHAT IS GOING ON WITH INFECTION PREVENTION?

Directions

Read and analyze this case study individually. When others in your group have finished reading it, answer the questions. When all the groups have finished, we will discuss the situation and the answers each group developed.

Case Study

Two nurses from a district hospital were trained in a regional workshop on infection prevention. Topics covered during the training included handwashing, correct use of gloves, decontamination of instruments, correct disposal of sharps, and waste disposal.

Two months after training was completed, a regional supervisor visited the hospital and found the following:

- Nurses wore the same pair of gloves and examined several patients before changing them.
- Used syringes were accumulating in an open basin for eventual disposal.
- Laborers were disposing of waste using no protective hand covering.
- The decontamination solution was not being mixed according to infection prevention guidelines.

Questions

- Why do you think that these practices were occurring despite the training that the nurses received?
- Does this mean that the course was not effective?

EXERCISE 2

WHAT IS MY GREATEST PERFORMANCE BLOCK?¹

Directions

Think about your own work. What is your greatest performance block? What would you change to make the biggest difference in your own performance? Look at the following list. Your trainer is going to ask you to **choose only one** of the following, so choose carefully.

I would perform better if: **(Choose only one)**

1. I had better tools and resources to work with.
2. There was greater organizational and management support encouraging me and enabling me to do a better job.
3. I had a better understanding of the expectations for my job.
4. I received regular feedback about how I am doing so I could know where I need to improve.
5. I received more and better training to do my job.
6. I had better financial and non-financial incentives and consequences for my performance.

¹Adapted from: Stolovitch HD and EJ Keeps. 1999. *Getting Results Through Performance Consulting*. (Workshop handout).

EXERCISE 3

SETTING PERFORMANCE STANDARDS FOR YOUR FACILITY

Directions

In your groups, determine a priority area in one of your work settings where performance standards need to be set. You can take an issue identified on Day One or identify an issue that is important to several people in your group. Standards for clinical procedures exist. Therefore, have groups choose nonclinical areas for developing standards such as:

- Client flow
- Record keeping
- Cleanliness of common areas
- Sharps disposal

(The participants may have other suggestions.)

Working together as a group, write three to five performance standards, with indicators, that would be appropriate for your facility. (Refer to the examples posted on the walls as you write your performance standards.) Remember to include supplies, equipment, and infrastructure necessary for performance.

Write your standards and indicators on a flipchart and be prepared to share them with the larger group.

Questions

As you present your performance standards back to the larger group, please answer the following questions:

- Who else would you speak with before making these final?
- How would you use these standards at your facility and how would you make sure that the staff is aware they exist?
- Comment on the process of creating performance standards as a group exercise.

EXERCISE 4

ASSESSING FACILITY PERFORMANCE: A SERIES OF ROLE PLAYS

Directions

The focus of **Chapter Three** is on how to assess facility performance to determine if standards are being met. Although there are a number of approaches described in the chapter, we are using role plays to focus on four of them.

The purpose of these assessments is to identify specific performance gaps or areas that need improvement. At the same time, you may identify areas in which performance is strong. Using one of the problems identified on Day One and posted on the wall, your group should prepare a role play to show the other groups how the assessment method you have been assigned works. Be creative. Have fun. Just make sure that it is clear how the assessment works. Directions for each of the four groups are described below.

- **Peer assessment role play.** One staff member (e.g., service provider) is assessing another. The group may use a clinical skill requiring an anatomic model and instruments, or may decide to use counseling as the focus of the role play. The group will also need a performance checklist. Be sure that at the end of your role play the areas requiring improvement (i.e., the “gaps”) are clear to those observing.
- **Supervisory assessment role play.** Although there are several approaches described in the chapter, the focus of your role play will be on observing clinical practice. One of your group will play the role of the supervisor while the other is a service provider. A third can play the role of the client. The group may use a clinical skill requiring an anatomic model and instruments, or may decide to use counseling as the focus of the role play. The group will also need a performance checklist. Be sure that at the end of your role play that the areas requiring improvement (i.e., the “gaps”) are clear to those observing.
- **Client feedback.** This role play should focus on an interview with a client. Be sure to include positive feedback as well as suggestions for improving the performance of the facility. Be sure that at the end of your role play the areas requiring improvement (i.e., the “gaps”) are clear to those observing.

- **Community perceptions.** This role play should focus on a meeting with several community members. Be sure to include positive feedback as well as suggestions for improving the performance of the facility. Be sure that at the end of your role play the areas requiring improvement (i.e., the “gaps”) are clear to those observing.

SUPERVISING HEALTHCARE SERVICES: IMPROVING THE PERFORMANCE OF PEOPLE COURSE EVALUATION

(To be completed by **Participants**)

Please indicate your opinion of the course components using the following rate scale:

5–Strongly Agree 4–Agree 3–No Opinion 2–Disagree 1–Strongly Disagree

COURSE COMPONENT	RATING
1. The Precourse Questionnaire helped me to study more effectively.	
2. The classroom sessions and exercises were adequate for learning performance improvement skills for supervisors.	
3. I am now confident defining desired performance.	
4. I am now confident assessing performance.	
5. I am now confident finding root causes.	
6. I am now confident selecting and implementing interventions.	
7. I am now confident monitoring and evaluating performance.	
8. I am now confident working with people.	
9. I am now confident in applying the performance improvement process to improve the quality of services at a healthcare facility.	

ADDITIONAL COMMENTS (use reverse side if needed)

1. What topics (if any) should be **added** (and why) to improve the course?

2. What topics (if any) should be **deleted** (and why) to improve the course?

SUPERVISING HEALTHCARE SERVICES: IMPROVING THE PERFORMANCE OF PEOPLE

COURSE NOTEBOOK FOR TRAINERS

SECTION TWO: GUIDE FOR TRAINERS

MODEL COURSE OUTLINE	1
PRECOURSE QUESTIONNAIRE	
Using the Individual and Group Assessment Matrix	18
Precourse Questionnaire Answer Key	19
POSTCOURSE QUESTIONNAIRE	
Using the Questionnaire	22
Postcourse Questionnaire	23
Postcourse Questionnaire Answer Sheet	31
Postcourse Questionnaire Answer Key	35

MODEL COURSE OUTLINE

The course outline presented here is a model plan of the training to be delivered according to the course schedule. It presents enabling objectives and activities needed to accomplish the participant learning objectives described in the course syllabus. For each enabling objective and activity, there are suggestions regarding appropriate learning activities, resources, and materials needed. The trainer may develop other practice activities and prepare case studies, role plays, or other learning situations that are specific to the country or group of participants.

The course outline is divided into four columns:

- **Time.** This section of the outline indicates the approximate amount of time to be devoted to each learning activity. The times presented here are consistent with the course schedule.
- **Objectives/Activities.** This column lists the enabling objectives and learning activities. Because the objectives outline the sequence of training, the objectives are presented here in order. The combination of the objectives and activities (introductory activities, small-group exercises, presentations, breaks, etc.) outlines the **flow** of training.
- **Training/Learning Methods.** This column describes the various methods, activities, and strategies to be used to deliver the content and skills related to each enabling objective.
- **Resources/Materials.** The fourth column in the course outline lists the resources and materials needed to support the learning activities.

Note that the course schedule is based on the course outline and that changes or modifications to one should be reflected in the other.

**MODEL COURSE OUTLINE FOR SUPERVISING HEALTHCARE SERVICES:
IMPROVING THE PERFORMANCE OF PEOPLE (5 Days, 10 Sessions)**

TIME	OBJECTIVES/ACTIVITIES	TRAINING/LEARNING METHODS	RESOURCES/MATERIALS
Session One: Day 1, AM (225 minutes)			
10 minutes	Activity: Welcome the participants.	Welcome by representatives of the organization(s) sponsoring the training course.	Course equipment: Overhead projector or computer with projection unit, screen, flipcharts with markers, masking tape, appropriate anatomic models, supplies, instruments, and a selection of performance checklists for clinical procedures. Refer to the Course Syllabus for the learning materials required for this course.
30 minutes	Activity: Facilitate introductions of the participants.	Participants divide into pairs, interview, and then introduce each other sharing their partner's name, position, and any unique characteristics. The trainers should also be involved in this activity.	
10 minutes	Activity: Provide an overview of the course.	Review the course syllabus and schedule. Discuss the goals of the course and the participant learning objectives.	Syllabus and schedule in the participant's handbook and trainer's notebook
10 minutes	Activity: Review course materials.	Distribute, review, and discuss materials used in this course. Review the table of contents of the <i>Supervising Healthcare Services: Improving the Performance of People</i> reference manual.	Reference manual, participant's handbook, and any supporting materials (see list of materials in the Course Syllabus)
15 minutes	Activity: Identify participant expectations.	Ask participants (individually or in small groups) to share their expectations of the course and record responses on the flipchart. Attach the flipchart page to the wall for reference throughout the course.	

**MODEL COURSE OUTLINE FOR SUPERVISING HEALTHCARE SERVICES:
IMPROVING THE PERFORMANCE OF PEOPLE (5 Days, 10 Sessions)**

TIME	OBJECTIVES/ACTIVITIES	TRAINING/LEARNING METHODS	RESOURCES/MATERIALS
45 minutes	Activity: Assess participants' precourse knowledge.	Ask the participants to turn to the precourse questionnaire in their handbook and answer each of the questions (or the trainer may distribute copies of the precourse questionnaire for the participants to complete). Ask the participants to close their handbook or turn the questionnaire over when finished (trainer may decide to have them leave the room as they finish in order to keep the noise to a minimum).	Precourse questionnaire in the participant's handbook
15 minutes	Break		
45 minutes	Activity: Identify individual and group learning needs.	Group grades questionnaires and completes an Individual and Group Assessment Matrix. The trainer should follow the directions in the trainer's notebook.	Individual and Group Assessment Matrix in the participant's handbook
45 minutes	Activity: What works and what does not	<p>The participants were asked to bring a list of areas that work well within their facility, as well as a list of areas where there are problems or where improvements could be made. Those who did not bring these lists may need a few minutes to develop them.</p> <p>Divide the participants into groups of about four. Ask the participants to discuss their lists and then create two flipcharts, one with the positive areas and the other with the areas in need of improvement. These are to be posted on the wall for reference throughout the course.</p> <p>Once these are posted, the trainer should facilitate a general discussion on the participants' observations. The trainer should point out that these will be the basis for a number of activities during the course.</p>	

**MODEL COURSE OUTLINE FOR SUPERVISING HEALTHCARE SERVICES:
IMPROVING THE PERFORMANCE OF PEOPLE (5 Days, 10 Sessions)**

TIME	OBJECTIVES/ACTIVITIES	TRAINING/LEARNING METHODS	RESOURCES/MATERIALS
Session Two: Day 1, PM (185 minutes)			
30 minutes	Chapter 1: Introduction to Supervising Healthcare Services Objective: Describe what is meant by healthcare services supervision.	Ask the participants to share their definitions of “supervision.” Compare their definitions with the one in the chapter. Discuss the differences between internal and external supervisors. Ask them how they became supervisors.	
15 minutes	Objective: Identify individuals who are healthcare services supervisors.	Review the various types of individuals who may be healthcare services supervisors. Ask the participants to share other examples.	
45 minutes	Objective: Identify the responsibilities of a healthcare services supervisor.	Briefly review the responsibilities, skills, and personal characteristics required of an effective healthcare services supervisor. Ask the participants to work in pairs and share a personal example for one of the three areas. For example, if they were to select the skill of “motivate others,” then they would share an example of how they did this.	
10 minutes	Activity: Chapter summary	Review the key points and concepts presented in the chapter. Involve the participants as much as possible in the summary.	
10 minutes	Break		

**MODEL COURSE OUTLINE FOR SUPERVISING HEALTHCARE SERVICES:
IMPROVING THE PERFORMANCE OF PEOPLE (5 Days, 10 Sessions)**

TIME	OBJECTIVES/ACTIVITIES	TRAINING/LEARNING METHODS	RESOURCES/MATERIALS												
10 minutes	Objective: Describe what is meant by supervision for performance and improvement in the quality of services.	Ask participants how most healthcare workers view their supervisor. Present the description in the manual and compare this with the comments of the participants. Stress that this is a more effective and appropriate “style” of supervision.													
60 minutes	Objective: Demonstrate an understanding of the performance improvement process.	<p>Ask the participants to read Exercise 1. Working in pairs, the participants are to answer the questions. When everyone has finished, facilitate a discussion focusing on the responses. Stress the point that there are many factors that affect the performance of a worker and that training alone may not be sufficient.</p> <p>Using the infection prevention situation in Exercise 1 as an example, walk the participants through the performance improvement process (Figure 1-1 on page 1-7 of reference manual). Do not go into depth at this point.</p> <p>Ask the participants to read Exercise 2. Given the six choices, which one would each participant select to improve her or his performance? Once they select a choice, ask the participants to come to the flipchart and put a U in the box with the number corresponding to their choice. When complete, make the following points:</p> <ul style="list-style-type: none">• Choices 1, 2, 3, and 4 are external to the person.• Choices 5 and 6 are internal to the person.• Usually training (choice 5) is selected by only a few participants. <p>Point out to the participants that training is only one possible intervention to improve performance.</p> <p>Present in more depth the definition of each of the components of the process. Remember that there is a chapter focusing on each component, so at this point just present the description of each component.</p>	<p>Prepare a flipchart as follows:</p> <table><tr><td>Facilities, Equipment & Supplies</td><td>Organ-izational Support</td><td>Job Expectations</td></tr><tr><td>1</td><td>2</td><td>3</td></tr><tr><td>Performance Feedback</td><td>Knowledge/ Skills</td><td>Motivation</td></tr><tr><td>4</td><td>5</td><td>6</td></tr></table>	Facilities, Equipment & Supplies	Organ-izational Support	Job Expectations	1	2	3	Performance Feedback	Knowledge/ Skills	Motivation	4	5	6
Facilities, Equipment & Supplies	Organ-izational Support	Job Expectations													
1	2	3													
Performance Feedback	Knowledge/ Skills	Motivation													
4	5	6													
5 minutes	Activity: Chapter summary	Review the key points and concepts presented in the chapter. Involve the participants as much as possible in the summary.													

**MODEL COURSE OUTLINE FOR SUPERVISING HEALTHCARE SERVICES:
IMPROVING THE PERFORMANCE OF PEOPLE (5 Days, 10 Sessions)**

TIME	OBJECTIVES/ACTIVITIES	TRAINING/LEARNING METHODS	RESOURCES/MATERIALS
Session Three, Day 2, AM (225 minutes)			
15 minutes	Activity: Agenda and opening activity	Participants use the course schedule to develop the agenda, which is written on the flipchart. One or more of the participants plans and conducts an opening activity or warmup.	
45 minutes	Chapter 2: Defining Desired Performance Activity: Create a shared vision among your team.	<p>Depending on time, the trainer can choose one or both of the following exercises to help participants see how to create a vision statement for their facility.</p> <p>Option 1: Conduct a short visioning exercise with the group, asking them to close their eyes and think about their facility 5 years from now. While their eyes are closed, ask them to think about their facility in the most ideal world, where problems are easily solved, clients and patients are happy, resources are available, etc. This is to get them in the mood of thinking positively about their facilities.</p> <p>Divide the participants into groups of four. Ask each group to assume they are from a healthcare facility and they are to develop a vision statement. Each group is to use a flipchart and “draw” their vision statement. This means trying to capture their vision with a picture. Once the groups have finished, they should share their vision statements through their drawing. Note: It is important that the groups do not see the drawings being created by other groups. Keep everything secret until the drawings are shown.</p> <p>Option 2: Ask participants to work individually. They are to think about their facility and then write a letter pretending it is 5 years from now. The letter, written to a friend, describes what their facility is like including aspects such as what it looks like, what is going on, what services are being provided, how people are behaving, etc. When finished, the participants should read their letter to the group.</p>	

**MODEL COURSE OUTLINE FOR SUPERVISING HEALTHCARE SERVICES:
IMPROVING THE PERFORMANCE OF PEOPLE (5 Days, 10 Sessions)**

TIME	OBJECTIVES/ACTIVITIES	TRAINING/LEARNING METHODS	RESOURCES/MATERIALS
45 minutes	<p>Objective: Set organizational and other types of performance standards.</p> <p>Activity: Setting standards for something familiar</p>	<p>Activity 1, Introduction to Standards: Find something with which everyone is familiar (e.g., taxis, buses, markets). Using this example, divide the participants into groups of four. Ask them to develop standards for taxi service, for example. Ask the participants to take on roles such as the driver of the taxi, the passenger, the taxi company owner, and the Ministry of Transportation. Playing these “roles,” the groups must come to consensus about standards for the taxi service.</p>	
45 minutes	<p>Objective: Set organizational and other types of performance standards.</p>	<p>Present the information in the chapter. Refer to the case study and discuss how desired performance was identified.</p> <p>Stress the importance of setting standards for the healthcare delivery facility. Share with the participants copies of the service delivery guidelines, job descriptions (or they can use the ones they brought), and international guidelines (to be used in the next activity).</p>	
60 minutes	<p>Objective: Set organizational and other types of performance standards.</p> <p>Activity: Setting standards for a healthcare facility</p>	<p>Activity 2: Divide the participants into groups of four. Participants are to complete Exercise 3. Before the groups start defining standards for their clinic, link to Activity 1 by demonstrating:</p> <p>Role of passenger → Client or Patient Role of driver → Clinician Role of owner → Supervisor Role of Ministry of Transportation → Ministry of Health</p> <p>The groups will present their standards during the afternoon session.</p>	
15 minutes	<p>Activity: Chapter summary</p>	<p>Review the key points and concepts presented in the chapter. Involve the participants as much as possible in the summary.</p>	

**MODEL COURSE OUTLINE FOR SUPERVISING HEALTHCARE SERVICES:
IMPROVING THE PERFORMANCE OF PEOPLE (5 Days, 10 Sessions)**

TIME	OBJECTIVES/ACTIVITIES	TRAINING/LEARNING METHODS	RESOURCES/MATERIALS
Session Four: Day 2, PM (185 minutes)			
50 minutes	Activity: Presentation of standards	Groups present standards from the morning.	
5 minutes	Activity: Chapter summary	Review the key points and concepts presented in the chapter. Involve the participants as much as possible in the summary.	
20 minutes	Chapter 3: Assessing Performance Objective: Demonstrate seven methods of assessing performance.	Present information in Chapter 3 . There are seven methods for assessing facility performance described in the chapter. In addition, there are several approaches that can be used with supervisory assessments. Briefly review the seven basic approaches. Then divide the participants into four groups.	
15 minutes	Break		

**MODEL COURSE OUTLINE FOR SUPERVISING HEALTHCARE SERVICES:
IMPROVING THE PERFORMANCE OF PEOPLE (5 Days, 10 Sessions)**

TIME	OBJECTIVES/ACTIVITIES	TRAINING/LEARNING METHODS	RESOURCES/MATERIALS
90 minutes (including break)	<p>Objective: Demonstrate seven methods of assessing performance.</p> <p>Activity: Assessment role play</p>	<p>Inform the groups that they are to prepare a role play based on one of the problems identified on Day 1 and posted on the wall. Assign one assessment method to each group. Refer the participants to Exercise 4 for instructions.</p> <p>Given that two of the groups will be doing clinical role plays, it is suggested that the trainer demonstrate how to assess clinical practice. This demonstration should take place during this session so that the groups can prepare for their role plays.</p> <p>Assessment role plays: Each group will present their role play. Following each role play, the trainer will facilitate a discussion focusing on the assessment method as well as the performance gaps identified during the role play.</p> <p>Following the role plays, the trainer will present information on the methods not covered by the role plays (e.g., using records and reports, and comparing a facility to other facilities). Review the case study section related to assessing performance in Appendix B of the reference manual (page B-4).</p>	
5 minutes	<p>Activity: Chapter summary</p>	<p>Review the key points and concepts presented in the chapter. Involve the participants as much as possible in the summary.</p>	

**MODEL COURSE OUTLINE FOR SUPERVISING HEALTHCARE SERVICES:
IMPROVING THE PERFORMANCE OF PEOPLE (5 Days, 10 Sessions)**

TIME	OBJECTIVES/ACTIVITIES	TRAINING/LEARNING METHODS	RESOURCES/MATERIALS
Session Five: Day 3, AM (225 minutes)			
10 minutes	Activity: Agenda and opening activity	Participants use the course schedule to develop the agenda, which is written on the flipchart. One or more of the participants plans and conducts an opening activity or warmup.	
10 minutes	Chapter 4: Finding Root Causes Objective: Prioritize performance gaps.	Review the list of criteria to help determine which gaps to address first. Ask the participants to think about others that could be added to the list.	
110 minutes	Objective: Find out the causes of poor performance. Discussion: Why-Why diagrams	Remind the participants that the problems they identified on Day 1 could be written as problem statements. Review the steps in the Why-Why method. Divide the participants into four groups. Let them create a “problem” or “problems” from the standards they developed. Ask each group to apply the Why-Why method and to try to make their responses as realistic as possible. When all groups have finished, ask them to share the results of their work. Participants present their Why-Why diagrams.	
15 minutes	Break		
10 minutes	Activity: Chapter summary	Review the key points and concepts presented in the chapter. Involve the participants as much as possible in the summary.	

**MODEL COURSE OUTLINE FOR SUPERVISING HEALTHCARE SERVICES:
IMPROVING THE PERFORMANCE OF PEOPLE (5 Days, 10 Sessions)**

TIME	OBJECTIVES/ACTIVITIES	TRAINING/LEARNING METHODS	RESOURCES/MATERIALS
70 minutes	<p>Chapter 5: Selecting and Implementing Interventions</p> <p>Objective: Matching interventions to root causes</p> <p>Objective: Defining your resources</p> <p>Objective: Setting priorities</p>	<p>Present the information in the chapter for the first three topics. Review the interventions in Table 5-1 of the reference manual (page 5-3). Review the priority setting tool in Sample 5-1 (page 5-12 of the reference manual).</p> <p>Ask the participants to work in the same groups as in the previous exercise. They are to brainstorm to create a list of possible interventions to address the cause(s) of the problem they identified. They should be creative and identify as many as possible. They should not discuss each one, just get them on a list. Table 5-1 will be useful in identifying possible interventions.</p> <p>Review again the prioritization tool at the end of the chapter (Sample 5-1). Explain how it works and tell the participants that they may come up with different criteria depending on what the problem is.</p> <p>Have the groups take their list of interventions and prioritize them using the prioritization tool. Ask the participants to describe how they prioritized their interventions and to share the one they would implement first.</p>	

**MODEL COURSE OUTLINE FOR SUPERVISING HEALTHCARE SERVICES:
IMPROVING THE PERFORMANCE OF PEOPLE (5 Days, 10 Sessions)**

TIME	OBJECTIVES/ACTIVITIES	TRAINING/LEARNING METHODS	RESOURCES/MATERIALS
Session Six: Day 3 PM (180 minutes)			
30 minutes	Chapter 5: Selecting and Implementing Interventions (continued) Objective: Moving from interventions to specific actions	Present the information in the chapter. Stress the importance of having an action plan. Review the action plans presented in Table 5-2 and Sample 5-2 of the reference manual (pages 5-8 and 5-15).	Copies of the blank action plan form in Sample 5-2
45 minutes	Objective: Other considerations in selecting and implementing interventions	Present the information in the chapter. Ask some of the participants where they will find the resources to implement some of their interventions. Point out that as interventions are implemented, changes will occur. Ask participants how they will manage the change. Present the information in the manual. Review the case study section related to selecting and implementing interventions in Appendix B of the reference manual (page B-7).	
45 minutes	Chapter 6: Monitoring and Evaluating Performance Objective: Describe the importance of monitoring and evaluation in the performance improvement process.	Review the performance improvement process by touching on each step in the model shown in Chapter 1 . Review the definitions of monitoring and evaluation presented in the chapter.	
45 minutes	Objective: Identify tools for monitoring and evaluating.	Present the information in the chapter. Point out that the tools available for monitoring and evaluating each step of the performance improvement process are in the various chapters in the manual. Review the case study section related to monitoring and evaluating performance in Appendix B of the reference manual (page B-7).	
15 minutes	Activity: Chapter summary	Review the key points and concepts presented in the chapter. Involve the participants as much as possible in the summary.	

**MODEL COURSE OUTLINE FOR SUPERVISING HEALTHCARE SERVICES:
IMPROVING THE PERFORMANCE OF PEOPLE (5 Days, 10 Sessions)**

TIME	OBJECTIVES/ACTIVITIES	TRAINING/LEARNING METHODS	RESOURCES/MATERIALS
Session Seven: Day 4, AM (220 minutes)			
10 minutes	Activity: Agenda and opening activity	Participants use the course schedule to develop the agenda, which is written on the flipchart. One or more of the participants plans and conducts an opening activity or warmup.	
40 minutes	Chapter 7: Working with People Objective: Demonstrate effective communication skills.	Present the information in the chapter. The trainer should demonstrate each of the essential communication skills. If time permits, ask the participants to work in pairs or small groups to prepare a brief demonstration of one of the communication skills. The trainer can also assign each of the four areas (active listening, positive body language, clarification, and questioning techniques) to groups, and ask each group to briefly present the key points.	
35 minutes	Objective: Facilitate teamwork.	Ask for a volunteer to describe a team she or he would like to form. Using this idea for a team, ask the volunteer what she or he sees as the advantages and disadvantages of forming this team. Discuss the information related to motivating the team. Ask the group for examples of how the volunteer can motivate her or his team.	

**MODEL COURSE OUTLINE FOR SUPERVISING HEALTHCARE SERVICES:
IMPROVING THE PERFORMANCE OF PEOPLE (5 Days, 10 Sessions)**

TIME	OBJECTIVES/ACTIVITIES	TRAINING/LEARNING METHODS	RESOURCES/MATERIALS
90 minutes	Objective: Plan and facilitate productive meetings.	<p>Try to find a type of meeting with which everyone would be familiar. It doesn't have to be work-related. It could be a church or school meeting. It just must be an example that helps the participants use the agenda guidelines. The participants will build on this example throughout this chapter.</p> <p>Facilitate a brainstorming session focusing on the worst and best meetings the participants have attended. List these on the flipchart and post on the wall for reference during this session. Present the information in the chapter.</p>	
30 minutes	Activity: Role play on managing meetings	<p>Divide the participants into groups of about six. Each group is to develop an agenda for a brief meeting. Suggest that each group select one or two topics, develop their agenda, and then a role play to present to the other group(s). Each role play should last no longer than 5–7 minutes. In the role play the group should demonstrate:</p> <ul style="list-style-type: none"> • The objective of the meeting • Information brought to the meeting • Who the participants are • Location and duration of the meeting • The meeting agenda <p>Following the role plays, the trainer should facilitate a discussion focusing on the positive aspects of the role plays along with suggestions for improving meetings. (If there is not enough time to conduct multiple role plays, assign one group the role of observer and have them comment on the role play.)</p>	
15 minutes	Objective: Coordinate with multiple stakeholders.	Ask participants to describe their stakeholders from the perspective of their healthcare facility. Present the information in the chapter. Stress the importance of constantly communicating with your stakeholders.	

**MODEL COURSE OUTLINE FOR SUPERVISING HEALTHCARE SERVICES:
IMPROVING THE PERFORMANCE OF PEOPLE (5 Days, 10 Sessions)**

TIME	OBJECTIVES/ACTIVITIES	TRAINING/LEARNING METHODS	RESOURCES/MATERIALS
Session Eight: Day 4, PM (180 minutes)			
60 minutes	Activity: Assess participants' postcourse knowledge.	<p>Make copies of the Postcourse Questionnaire and the Answer Sheet. Give each participant a copy of the Questionnaire and Answer Sheet. Review the instructions printed on the Postcourse Questionnaire.</p> <p>The trainer should score the Postcourse Questionnaires. Answers should be reviewed with the entire group. The trainer will meet with those participants scoring less than 85%. After discussing the items missed, the participants should spend additional study time and then retake the Postcourse Questionnaire until they achieve a score of at least 85%.</p>	Postcourse Questionnaire and Answer Sheet from the trainer's notebook
110 minutes (including break)	Activity: Action planning	Participants are to begin work on an individual (or facility if there is more than one participant from a facility) action plan describing specific activities they will complete as a result of attending this course. The plan should be shared with their supervisor and other workers as soon as they return from this course.	
10 minutes	Activity: Review of the day's activities	Involve the participants in review and discussion of the topics and events covered during the day.	

**MODEL COURSE OUTLINE FOR SUPERVISING HEALTHCARE SERVICES:
IMPROVING THE PERFORMANCE OF PEOPLE (5 Days, 10 Sessions)**

TIME	OBJECTIVES/ACTIVITIES	TRAINING/LEARNING METHODS	RESOURCES/MATERIALS
Session Nine, Day 5, AM (225 minutes)			
15 minutes	Activity: Agenda and opening activity	Participants use the course schedule to develop the agenda, which is written on the flipchart. One or more of the participants plans and conducts an opening activity or warmup.	
120 minutes (including break)	Discussion: Action planning (continued)	Participants are to complete their work on their individual (or facility if there is more than one participant from a facility) action plan describing specific activities they will complete as a result of attending this course. The plan should be shared with their supervisor and other workers as soon as they return from this course.	
90 minutes	Activity: Complete and share a personal action plan.	Participants present the action plans they developed.	Trainer to make copies of the completed action plans for use during followup coaching activities

**MODEL COURSE OUTLINE FOR SUPERVISING HEALTHCARE SERVICES:
IMPROVING THE PERFORMANCE OF PEOPLE (5 Days, 10 Sessions)**

TIME	OBJECTIVES/ACTIVITIES	TRAINING/LEARNING METHODS	RESOURCES/MATERIALS
Session Ten: Day 5, PM (90 minutes)			
15 minutes	Activity: Course summary	Review the main points. Touch on the primary topics covered during the course. Stress the importance of keeping in touch with the trainers, especially in regard to facility visits and coaching opportunities.	
30 minutes	Activity: Course evaluation	Participants complete the course evaluation form.	Distribute copies of the course evaluation form in the participant's handbook.
45 minutes	Activity: Closing ceremony		Statements of participation

PRECOURSE QUESTIONNAIRE

THE INDIVIDUAL AND GROUP ASSESSMENT MATRIX

The Precourse Questionnaire is not intended to be a test, but rather an assessment of what the participants, individually and as a group, know about the course topics. Participants, however, are often unaware of this and may become anxious and uncomfortable at the thought of being “tested” in front of their colleagues on the first day of the course. The trainer should be sensitive to this attitude and administer the questionnaire in a neutral and non-threatening way as the following guide illustrates:

- Participants draw numbers to assure anonymity (e.g., from 1 to 20 if there are 20 participants in the course).
- Participants complete the precourse questionnaire.
- The trainer gives the answer to each question.
- The trainer passes around the individual and group assessment matrix for each participant to complete according to her or his number. Each participant will locate her or his number across the top of the matrix. Moving down the column, each participant will place a [] in those rows where items were answered correctly.
- The trainer posts the completed matrix.
- The trainer and participants discuss the results of the questionnaire as charted on the matrix and jointly decide how to allocate course time.

PRECOURSE QUESTIONNAIRE ANSWER KEY

INTRODUCTION TO SUPERVISING HEALTHCARE SERVICES

- | | | |
|--|--------------|--|
| 1. Supervision can be conducted internally by an on-site supervisor and externally through supervisory visits. | TRUE | Participant Objective 1
(Chapter 1) |
| 2. Healthcare supervisors work only at the district or regional levels. | FALSE | Participant Objective 1
(Chapter 1) |
| 3. Although healthcare supervisors should work to improve the quality of services, they should avoid giving feedback to staff about their performance. | FALSE | Participant Objective 1
(Chapter 1) |
| 4. The goal of supervision for improvement of performance and the quality of services is the provision of high-quality services. | TRUE | Participant Objective 1
(Chapter 1) |
| 5. The first step in the performance improvement process is to create a shared vision with stakeholders. | TRUE | Participant Objective 1
(Chapter 1) |

DEFINING DESIRED PERFORMANCE

- | | | |
|---|--------------|--|
| 6. The primary purpose of a vision statement is to make sure all team members are working toward a common goal. | TRUE | Participant Objective 2
(Chapter 2) |
| 7. The supervisor is responsible for writing all of the performance standards for the facility. | FALSE | Participant Objective 2
(Chapter 2) |
| 8. Job descriptions can be used to set performance standards. | TRUE | Participant Objective 2
(Chapter 2) |
| 9. Standards must be flexible. | TRUE | Participant Objective 2
(Chapter 2) |
| 10. “A clean surface must be available for the birth of a baby” is an example of a performance standard. | TRUE | Participant Objective 2
(Chapter 2) |

ASSESSING PERFORMANCE

- | | | |
|--|--------------|--|
| 11. To find out how your clinic is doing, you need to periodically assess various areas within the facility. | TRUE | Participant Objective 3
(Chapter 3) |
| 12. Asking a colleague to evaluate your performance is known as a self-assessment. | FALSE | Participant Objective 3
(Chapter 3) |
| 13. Asking what community members think of or need from your clinic is a method of facility assessment. | TRUE | Participant Objective 3
(Chapter 3) |

- | | | |
|---|--------------|--|
| 14. Clients' feedback on facility performance is not as important as other feedback because they often have no choice but to visit your facility. | FALSE | Participant Objective 3
(Chapter 3) |
| 15. Supervisors should avoid reviewing case records for information because this will often upset the staff members who completed the record. | FALSE | Participant Objective 3
(Chapter 3) |

FINDING ROOT CAUSES

- | | | |
|--|--------------|--|
| 16. Root cause analysis is used to determine how individuals are performing. | FALSE | Participant Objective 4
(Chapter 4) |
| 17. One approach for identifying the causes of performance problems is to use the why-why method. | TRUE | Participant Objective 4
(Chapter 4) |
| 18. One of the key factors that affects performance is job expectations. | TRUE | Participant Objective 4
(Chapter 4) |
| 19. Because worker motivation is personal, the supervisor should not consider this as a factor that affects worker performance. | FALSE | Participant Objective 4
(Chapter 4) |

SELECTING AND IMPLEMENTING INTERVENTIONS

- | | | |
|---|--------------|--|
| 20. Interventions are designed to "close" the performance gap and improve the quality of services. | TRUE | Participant Objective 5
(Chapter 5) |
| 21. Using a checklist to assess worker performance is an example of an intervention to improve knowledge and skills. | FALSE | Participant Objective 5
(Chapter 5) |
| 22. Posting client satisfaction data is an example of an intervention you can use to provide feedback on performance. | TRUE | Participant Objective 5
(Chapter 5) |
| 23. In the selection of interventions to improve performance, the focus should be only on what doesn't work. | FALSE | Participant Objective 5
(Chapter 5) |
| 24. Cultural acceptability is one consideration when selecting an intervention to improve performance. | TRUE | Participant Objective 5
(Chapter 5) |
| 25. An action plan is a tool you can use when planning an intervention. | TRUE | Participant Objective 5
(Chapter 5) |
| 26. The question of how interventions will be paid for is not a consideration. | FALSE | Participant Objective 5
(Chapter 5) |

27. People always act positively to change that may result from performance improvement interventions.	FALSE	Participant Objective 5 (Chapter 5)
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MONITORING AND EVALUATING PERFORMANCE

28. It is important to know if the performance improvement interventions being implemented are producing the intended results.	TRUE	Participant Objective 6 (Chapter 6)
29. Monitoring and evaluation activities always require elaborate study designs.	FALSE	Participant Objective 6 (Chapter 6)
30. Evaluation refers to how much things have changed due to implementing interventions.	TRUE	Participant Objective 6 (Chapter 6)
31. Obtaining client feedback is a method you can use as a monitoring tool.	TRUE	Participant Objective 6 (Chapter 6)
32. Comparing your facility with others is not considered a monitoring and evaluation tool.	FALSE	Participant Objective 6 (Chapter 6)
33. Monitoring should be started when you are identifying performance gaps and should occur on an ongoing basis.	TRUE	Participant Objective 6 (Chapter 6)
34. Monitoring and evaluation are a natural part of a continual process for improving performance and quality at a healthcare delivery facility.	TRUE	Participant Objective 6 (Chapter 6)

WORKING WITH PEOPLE

35. All staff members should be free to express and explain their views and should be encouraged to do so.	TRUE	Participant Objective 7 (Chapter 7)
36. In terms of developing a team, the larger the team the better.	FALSE	Participant Objective 7 (Chapter 7)
37. You are conducting a meeting with some of your staff. The first thing to ask is, "What would you like to talk about during the meeting?"	FALSE	Participant Objective 7 (Chapter 7)
38. Community members are considered healthcare facility stakeholders.	TRUE	Participant Objective 7 (Chapter 7)
39. As a supervisor, you are responsible for making all of the decisions and should avoid negotiating with staff.	FALSE	Participant Objective 7 (Chapter 7)
40. There is nothing the supervisor can do to decrease healthcare workers' resistance to change.	FALSE	Participant Objective 7 (Chapter 7)

POSTCOURSE QUESTIONNAIRE

USING THE QUESTIONNAIRE

This knowledge assessment is designed to help the participants determine if they have achieved the knowledge objectives of the course. By the end of the course, **all** participants are expected to achieve a score of 85% or better.

The questionnaire should be given at the time indicated in the course schedule. A score of 85% or more correct indicates knowledge-based mastery of the material presented in the reference manual. For those scoring less than 85% on their first attempt, the trainer should review the results with the participant individually and provide guidance on using the reference manual to learn the required information. Participants scoring less than 85% can retake the questionnaire.

The questionnaire should be administered in a neutral and non-threatening way as the following guide illustrates:

- Make copies of the questionnaire and the questionnaire answer sheet.
- Ask each participant to print her or his name on the first page of the questionnaire answer sheet.
- Participants are **not** to write on the questionnaire if the trainer is planning on using these questionnaires during another course.
- Participants should be given sufficient time to answer all questions.
- The trainer must remain in the room until all the participants have finished.
- To minimize noise, participants should turn in their questionnaires and leave the room when they are finished.
- The trainer will score each questionnaire and meet individually with those participants scoring less than 85%.
- When all participants achieve a score of at least 85%, the trainer should review all answers with the participants.
- The trainer must keep copies of the participants' answers with the course records.

POSTCOURSE QUESTIONNAIRE

Instructions: Write the letter of the single **best** answer to each question in the blank next to the corresponding number on the attached answer sheet.

INTRODUCTION TO SUPERVISING HEALTHCARE SERVICES

1. Ideally, supervision of healthcare services is conducted
 - a. at a national level.
 - b. internally by an on-site supervisor.
 - c. externally through supervisory visits.
 - d. both internally and externally.
2. Which of the following statements about a healthcare services supervisor is probably **NOT** true?
 - a. May work in a hospital setting
 - b. Has had extensive training to become a supervisor
 - c. Has responsibility for supervising health workers
 - d. May be a nurse, midwife, or physician
3. Healthcare services supervisors have specific responsibilities, should have certain skills, and should possess essential personal characteristics. Which of the following is an example of a personal characteristic?
 - a. Identifies standards for good clinical practice
 - b. Open to new and creative ideas
 - c. Leads discussions
 - d. Works with staff to make changes
4. The goal of the performance improvement approach to healthcare services supervision is to
 - a. provide high-quality health services.
 - b. control provider performance.
 - c. be facilitative.
 - d. inspect facilities for quality services.
5. One of the steps in the performance improvement process is to make sure staff know what they are supposed to do. This is important because
 - a. they need to write reports for their supervisor.
 - b. they need to be able to compare their job descriptions with others.
 - c. they cannot perform well if they do not know what it is they are supposed to do.
 - d. the supervisor needs to know when to correct them.

DEFINING DESIRED PERFORMANCE

6. Making sure all of your team members are working toward a common goal for the future is the primary purpose of a
 - a. standard.
 - b. benchmark.
 - c. criteria statement.
 - d. vision statement.
7. What is the primary purpose of a performance standard?
 - a. To have something against which workers can compare performance
 - b. To let people know how they are expected to perform
 - c. To show to external supervisors
 - d. To be consistent with international standards
8. Standards must address one or more of four variables. Which of the following most closely relates to the statement, “Services must ensure confidentiality”?
 - a. Quantity
 - b. Time
 - c. Cost
 - d. Quality
9. Which of the following is **NOT** a criterion for a useful standard?
 - a. Observable or measurable
 - b. Under facility or individual control
 - c. Inflexible or rigid
 - d. Realistic
10. Which of the following is **INCORRECT** in terms of communicating performance standards?
 - a. Make them available to all staff.
 - b. The supervisor should have the only copy to help with monitoring.
 - c. Develop job aids, posters, and wall charts as appropriate.
 - d. Share appropriate standards with clients.

ASSESSING PERFORMANCE

11. There are a number of areas within your facility that you could assess to determine if standards are being met. Which one of the following areas would most closely relate to determining if essential supplies are accessible when needed?
 - a. Clinical practice
 - b. Stock management
 - c. Patient flow
 - d. Record keeping
12. Evaluating your own performance against the standards set is known as a
 - a. peer assessment.
 - b. supervisory assessment.
 - c. colleague assessment.
 - d. self-assessment.
13. Finding out what the community thinks about your services is useful because
 - a. it lets you know who doesn't like your services.
 - b. you can punish staff members whom the community has criticized.
 - c. it is one way to find out if your facility is performing according to the standards you have set.
 - d. it will help you attract additional funding for your facility.
14. One of the most effective methods a supervisor can use to assess the performance of service providers is through
 - a. observing clinical practices.
 - b. interviewing the providers.
 - c. interviewing patients.
 - d. testing the providers.
15. You might want to compare your services with those of another healthcare facility because
 - a. it will tell you how many patients another facility is seeing.
 - b. you can learn how to do things better.
 - c. it can tell you who is not doing their job well.
 - d. it will help you find the cause(s) of performance problems.

FINDING ROOT CAUSES

16. Which of the following best describes the purpose of root cause analysis?
- a. Identify performance problems
 - b. Identify interventions to improve performance
 - c. Identify causes of performance problems
 - d. Identify performance factors
17. Which of the following is a method of determining why a problem exists?
- a. Why-Why method
 - b. What If method
 - c. Problem Analysis method
 - d. Performance Assessment method
18. Which of the following is **NOT** one of the common factors affecting performance?
- a. Job expectations
 - b. Lack of patient and community focus
 - c. Location of the healthcare facility
 - d. Knowledge and skills
19. Once you have identified the causes of poor performance, the next step is to
- a. monitor and evaluate the interventions you select.
 - b. identify and prioritize possible interventions.
 - c. list the causes of poor performance.
 - d. conduct a root cause analysis.

SELECTING AND IMPLEMENTING INTERVENTIONS

20. The purpose of a performance improvement intervention is to
- a. help with the root cause analysis process.
 - b. guide the process of identifying actual job performance.
 - c. close the gap between job expectations and job performance.
 - d. close the gap between desired and actual performance.
21. Which of the following would be the best example of an intervention to address a lack of clear job expectations?
- a. Clearly tell staff members how they are doing.
 - b. Arrange for a staff member to attend a training course.
 - c. Establish a performance appraisal system.
 - d. Work with staff to write clear job descriptions.

22. Which of the following would be the best example of an intervention to address a lack of performance feedback?
- a. Regularly post client satisfaction data.
 - b. Create job aids.
 - c. Invite community members to serve on clinic committees.
 - d. Establish a system of incentives.
23. Which of the following is the **BEST** approach when selecting interventions to improve performance?
- a. Focus only on those things that do not work at the facility.
 - b. Focus only on those things that do work at the facility.
 - c. Focus both on things that work and things that don't work at the facility.
 - d. Focus on what has worked at other facilities.
24. There are several criteria you should consider when selecting an intervention. Which of the following refers to whether or not the intervention is affordable?
- a. Effectiveness
 - b. Resource allocation
 - c. Feasibility
 - d. Cultural acceptability
25. Which of the following is a simple tool you can use to manage the implementation of an intervention?
- a. Checklist
 - b. Implementation guide
 - c. Job aid
 - d. Action plan
26. In order to pay for implementing interventions at a healthcare services facility, you will need to mobilize resources. Which of the following is **NOT** one of the potential sources listed in the chapter and is probably not a feasible source?
- a. Donations from an international agency
 - b. Clients
 - c. Local government
 - d. Community organizations
27. People are often afraid of change. In order to reduce resistance to change, there are a number of things you can do. Which of the following is **NOT** a recommended approach?
- a. Develop a shared vision.
 - b. Make sure the supervisor runs everything.
 - c. Involve all staff at the healthcare facility.
 - d. Involve key stakeholders.

MONITORING AND EVALUATING PERFORMANCE

28. The primary purpose of monitoring and evaluating performance is to
- determine desired job performance.
 - determine actual job performance.
 - know if interventions are having the intended results.
 - know which interventions to select to improve job performance.
29. Which of the following best describes the approach to monitoring of the performance improvement process presented in this reference manual?
- Elaborate study design
 - External monitoring and evaluation visits on a periodic basis
 - Day-to-day monitoring of performance and quality
 - Formal data collection and analysis processes in place
30. Which of the following is the definition of evaluation?
- Measurement of how much things have changed due to interventions
 - Measurement of desired compared to ideal job performance
 - Tracking progress of assessing job performance
 - Tracking progress toward set performance standards
31. Which of the following is the definition of monitoring?
- Measurement of how much things have changed due to interventions
 - Measurement of desired compared to ideal job performance
 - Tracking progress of assessing job performance
 - Tracking progress toward set performance standards
32. There are seven approaches you can use to assess performance. Which of the following is **NOT** one of these approaches?
- Self-assessment
 - Clients observing providers
 - Supervisor observing providers
 - Comparing your facility with others
33. In terms of the performance improvement process, when should monitoring begin?
- With the initial stages of identifying performance gaps
 - As soon as the first formal evaluation has been completed
 - Prior to the first formal evaluation
 - With root cause analysis

34. The **primary** purpose of using a performance improvement approach is to
- a. help the supervisor do a better job.
 - b. provide high-quality health services.
 - c. make sure good providers want to work at the facility.
 - d. achieve good reports.

WORKING WITH PEOPLE

35. Which of the following is a principle of effective communication?
- a. Conflict or disagreement is normal in human relationships.
 - b. Communications in the clinic are written primarily for the doctors to understand.
 - c. Staff members should be encouraged to freely express their opinions.
 - d. Communications are primarily for sending information.
36. Which of the following is a characteristic of a successful team?
- a. The team has at least 10 members.
 - b. Work is performed by one or two key members of the team.
 - c. The team has a complex set of work activities to accomplish.
 - d. Members feel that they have something to contribute.
37. Which of the following would be the **FIRST** step in preparing for a meeting?
- a. Clearly state the objectives at the beginning of the meeting.
 - b. Prepare the meeting agenda.
 - c. Determine the need for the meeting.
 - d. Decide on participants.
38. Which of the following is a realistic way for you and your team to obtain feedback from clients about their experiences at the clinic?
- a. Invite members of the community to write letters to you.
 - b. Keep a suggestion box in the clinic.
 - c. Interview every person leaving your clinic.
 - d. Hold daily meetings at your facility with community members.
39. How can links with the community be continually maintained?
- a. Place a suggestion box in the clinic to collect and implement feedback and ideas from clients.
 - b. Involve community volunteers in the improvement of your facility.
 - c. “b” only
 - d. “a” and “b”

40. The following are stakeholders

- a. The health facility staff
- b. Clients
- c. Community members
- d. All of the above

POSTCOURSE QUESTIONNAIRE ANSWER SHEET

Name: _____ Score: _____

INTRODUCTION TO SUPERVISING HEALTHCARE SERVICES

1. _____ Participant Objective 1, Chapter 1
2. _____ Participant Objective 1, Chapter 1
3. _____ Participant Objective 1, Chapter 1
4. _____ Participant Objective 1, Chapter 1
5. _____ Participant Objective 1, Chapter 1

DEFINING DESIRED PERFORMANCE

6. _____ Participant Objective 2, Chapter 2
7. _____ Participant Objective 2, Chapter 2
8. _____ Participant Objective 2, Chapter 2
9. _____ Participant Objective 2, Chapter 2
10. _____ Participant Objective 2, Chapter 2

ASSESSING PERFORMANCE

11. _____ Participant Objective 3, Chapter 3
12. _____ Participant Objective 3, Chapter 3
13. _____ Participant Objective 3, Chapter 3
14. _____ Participant Objective 3, Chapter 3
15. _____ Participant Objective 3, Chapter 3

FINDING ROOT CAUSES

- 16. _____ Participant Objective 4, Chapter 4
- 17. _____ Participant Objective 4, Chapter 4
- 18. _____ Participant Objective 4, Chapter 4
- 19. _____ Participant Objective 4, Chapter 4

SELECTING AND IMPLEMENTING INTERVENTIONS

- 20. _____ Participant Objective 5, Chapter 5
- 21. _____ Participant Objective 5, Chapter 5
- 22. _____ Participant Objective 5, Chapter 5
- 23. _____ Participant Objective 5, Chapter 5
- 24. _____ Participant Objective 5, Chapter 5
- 25. _____ Participant Objective 5, Chapter 5
- 26. _____ Participant Objective 5, Chapter 5
- 27. _____ Participant Objective 5, Chapter 5

MONITORING AND EVALUATING PERFORMANCE

- 28. _____ Participant Objective 6, Chapter 6
- 29. _____ Participant Objective 6, Chapter 6
- 30. _____ Participant Objective 6, Chapter 6
- 31. _____ Participant Objective 6, Chapter 6
- 32. _____ Participant Objective 6, Chapter 6
- 33. _____ Participant Objective 6, Chapter 6
- 34. _____ Participant Objective 6, Chapter 6

WORKING WITH PEOPLE

- 35. _____ Participant Objective 7, Chapter 7
- 36. _____ Participant Objective 7, Chapter 7
- 37. _____ Participant Objective 7, Chapter 7
- 38. _____ Participant Objective 7, Chapter 7
- 39. _____ Participant Objective 7, Chapter 7
- 40. _____ Participant Objective 7, Chapter 7

POSTCOURSE QUESTIONNAIRE ANSWER KEY

INTRODUCTION TO SUPERVISING HEALTHCARE SERVICES

1. Ideally, supervision of healthcare services is conducted
 - a. at a national level.
 - b. internally by an on-site supervisor.
 - c. externally through supervisory visits.
 - D. BOTH INTERNALLY AND EXTERNALLY.**
2. Which of the following statements about healthcare service supervisors is probably **NOT** true?
 - a. May work in a hospital setting
 - B. HAS HAD EXTENSIVE TRAINING TO BECOME A SUPERVISOR**
 - c. Has responsibility for supervising health workers
 - d. May be a nurse, midwife, or physician
3. Healthcare services supervisors have specific responsibilities, should have certain skills, and should possess essential personal characteristics. Which of the following is an example of a personal characteristic?
 - a. Identifies standards for good clinical practice
 - B. OPEN TO NEW AND CREATIVE IDEAS**
 - c. Leads discussions
 - d. Works with staff to make changes
4. The goal of the performance and quality improvement approach to healthcare services supervision is to
 - A. PROVIDE HIGH-QUALITY HEALTH SERVICES.**
 - b. control provider performance.
 - c. be facilitative.
 - d. inspect facilities for quality services.
5. One of the steps in the performance improvement process is to make sure staff know what they are supposed to do. This is important because
 - a. they need to write reports for their supervisor.
 - b. they need to be able to compare their job descriptions with others.
 - C. THEY CANNOT PERFORM WELL IF THEY DO NOT KNOW WHAT IT IS THEY ARE SUPPOSED TO DO.**
 - d. the supervisor needs to know when to correct them.

DEFINING DESIRED PERFORMANCE

6. Making sure all of your team members are working toward a common goal for the future is the primary purpose of a
 - a. standard.
 - b. benchmark.
 - c. criteria statement.**D. VISION STATEMENT.**
7. What is the primary purpose of a performance standard?
 - a. To have something against which workers can compare performance
 - B. TO LET PEOPLE KNOW HOW THEY ARE EXPECTED TO PERFORM**
 - c. To show to external supervisors
 - d. To be consistent with international standards
8. Standards must address one or more of four variables. Which of the following most closely relates to the statement, “Services must ensure confidentiality”?
 - a. Quantity
 - b. Time
 - c. Cost
 - D. QUALITY**
9. Which of the following is **NOT** a criterion for a useful standard?
 - a. Observable or measurable
 - b. Under site or individual control
 - C. INFLEXIBLE OR RIGID**
 - d. Realistic
10. Which of the following is **INCORRECT** in terms of communicating performance standards?
 - a. Make them available to all staff.
 - B. THE SUPERVISOR SHOULD HAVE THE ONLY COPY TO HELP WITH MONITORING.**
 - c. Develop job aids, posters, and wall charts as appropriate.
 - d. Share appropriate standards with clients.

ASSESSING PERFORMANCE

11. There are a number of areas within your facility that you could assess to determine if standards are being met. Which one of the following areas would most closely relate to determining if essential supplies are accessible when needed?
- a. Clinical practice
 - B. STOCK MANAGEMENT**
 - c. Patient flow
 - d. Record-keeping
12. Evaluating your own performance against the standards set is known as a
- a. peer assessment.
 - b. supervisory assessment.
 - c. colleague assessment.
 - D. SELF-ASSESSMENT.**
13. Finding out what the community thinks about your services is useful because
- a. it lets you know who doesn't like your services.
 - b. you can punish staff members whom the community has criticized.
 - C. IT IS ONE WAY TO FIND OUT IF YOUR FACILITY IS PERFORMING ACCORDING TO THE STANDARDS YOU HAVE SET.**
 - d. it will help you attract additional funding for your site.
14. One of the most effective methods a supervisor can use to assess the performance of service providers is through
- A. OBSERVING CLINICAL PRACTICES.**
 - b. interviewing the providers.
 - c. interviewing patients.
 - d. testing the providers.
15. You might want to compare your services with those of another healthcare facility because
- a. it will tell you how many patients another site is seeing.
 - B. YOU CAN LEARN HOW TO DO THINGS BETTER.**
 - c. it can tell you who is not doing their job well.
 - d. it will help you find the cause(s) of performance problems.

FINDING ROOT CAUSES

16. Which of the following best describes the purpose of root cause analysis?

- a. Identify performance problems
- b. Identify interventions to improve performance
- C. IDENTIFY CAUSES OF PERFORMANCE PROBLEMS**
- d. Identify performance factors

17. Which of the following is a method of determining why a problem exists?

- A. WHY-WHY METHOD**
- b. What If method
- c. Problem Analysis method
- d. Performance Assessment method

18. Which of the following is **NOT** one of the common factors affecting performance?

- a. Job expectations
- b. Lack of patient and community focus
- C. LOCATION OF THE HEALTHCARE FACILITY**
- d. Knowledge and skills

19. Once you have identified the causes of poor performance, the next step is to

- a. monitor and evaluate the interventions you select.
- B. IDENTIFY AND PRIORITIZE POSSIBLE INTERVENTIONS.**
- c. list the causes of poor performance.
- d. conduct a root cause analysis.

SELECTING AND IMPLEMENTING INTERVENTIONS

20. The purpose of a performance improvement intervention is to

- a. help with the root cause analysis process.
- b. guide the process of identifying actual job performance.
- c. close the gap between job expectations and job performance.
- D. CLOSE THE GAP BETWEEN DESIRED AND ACTUAL PERFORMANCE.**

21. Which of the following would be the best example of an intervention to address a lack of clear job expectations?

- a. Clearly tell staff members how they are doing.
- b. Arrange for a staff member to attend a training course.
- c. Establish a performance appraisal system.
- D. WORK WITH STAFF TO WRITE CLEAR JOB DESCRIPTIONS.**

22. Which of the following would be the best example of an intervention to address a lack of performance feedback?
- A. REGULARLY POST CLIENT SATISFACTION DATA.**
 - b. Create job aids.
 - c. Invite community members to serve on clinic committees.
 - d. Establish a system of incentives.
23. Which of the following is the **BEST** approach when selecting interventions to improve performance?
- a. Focus only on those things that do not work at the facility.
 - b. Focus only on those things that do work at the facility.
 - C. FOCUS BOTH ON THINGS THAT WORK AND THINGS THAT DON'T WORK AT THE FACILITY.**
 - d. Focus on what has worked at other facilities.
24. There are several criteria you should consider when selecting an intervention. Which of the following refers to whether or not the intervention is affordable?
- a. Effectiveness
 - B. RESOURCE ALLOCATION**
 - c. Feasibility
 - d. Cultural acceptability
25. Which of the following is a simple tool you can use to manage the implementation of an intervention?
- a. Checklist
 - b. Implementation guide
 - c. Job aid
 - D. ACTION PLAN**
26. In order to pay for implementing interventions at a healthcare services facility, you will need to mobilize resources. Which of the following is **NOT** one of the potential sources listed in the chapter and is probably not a feasible source?
- A. DONATIONS FROM AN INTERNATIONAL AGENCY**
 - b. Clients
 - c. Local government
 - d. Community organizations
27. People are often afraid of change. In order to reduce resistance to change there are a number of things you can do. Which of the following is **NOT** a recommended approach?
- a. Develop a shared vision.
 - B. MAKE SURE THE SUPERVISOR RUNS EVERYTHING.**
 - c. Involve all staff at the healthcare site.
 - d. Involve key stakeholders.

MONITORING AND EVALUATING PERFORMANCE

28. The primary purpose of monitoring and evaluating performance is to
- a. determine desired job performance.
 - b. determine actual job performance.
 - C. KNOW IF INTERVENTIONS ARE HAVING THE INTENDED RESULTS.**
 - d. know which interventions to select to improve job performance.
29. Which of the following best describes the approach to monitoring of the performance improvement process presented in this reference manual?
- a. Elaborate study design
 - b. External monitoring and evaluation visits on a periodic basis
 - C. DAY-TO-DAY MONITORING OF PERFORMANCE AND QUALITY**
 - d. Formal data collection and analysis processes in place
30. Which of the following is the definition of evaluation?
- A. MEASUREMENT OF HOW MUCH THINGS HAVE CHANGED DUE TO INTERVENTIONS**
 - b. Measurement of desired compared to ideal job performance
 - c. Tracking progress of assessing job performance
 - d. Tracking progress toward set performance standards
31. Which of the following is the definition of monitoring?
- a. Measurement of how much things have changed due to interventions
 - b. Measurement of desired compared to ideal job performance
 - c. Tracking progress of assessing job performance
 - D. TRACKING PROGRESS TOWARD SET PERFORMANCE STANDARDS**
32. There are seven approaches you can use to assess performance. Which of the following is **NOT** one of these approaches?
- a. Self-assessment
 - B. CLIENTS OBSERVING PROVIDERS**
 - c. Supervisor observing providers
 - d. Comparing your facility with others
33. In terms of the performance improvement process, when should monitoring begin?
- A. WITH THE INITIAL STAGES OF IDENTIFYING PERFORMANCE GAPS**
 - b. As soon as the first formal evaluation has been completed
 - c. Prior to the first formal evaluation
 - d. With root cause analysis

34. The **primary** purpose of using a performance improvement approach is to
- a. help the supervisor do a better job.
 - B. PROVIDE HIGH-QUALITY HEALTH SERVICES.**
 - c. make sure good providers want to work at the facility.
 - d. achieve good reports.

WORKING WITH PEOPLE

35. Which of the following is a principle of effective communication?
- a. Conflict or disagreement is normal in human relationships.
 - b. Communications in the clinic are written primarily for the doctors to understand.
 - C. STAFF MEMBERS SHOULD BE ENCOURAGED TO FREELY EXPRESS THEIR OPINIONS.**
 - d. Communications are primarily for sending information.
36. Which of the following is a characteristic of a successful team?
- a. The team has at least 10 members.
 - b. Work is performed by one or two key members of the team.
 - c. The team has a complex set of work activities to accomplish.
 - D. MEMBERS FEEL THAT THEY HAVE SOMETHING TO CONTRIBUTE.**
37. Which of the following would be the **FIRST** step in preparing for a meeting?
- a. Clearly state the objectives at the beginning of the meeting.
 - b. Prepare the meeting agenda.
 - C. DETERMINE THE NEED FOR THE MEETING.**
 - d. Decide on participants.
38. Which of the following is a realistic way for you and your team to obtain feedback from clients about their experiences at the clinic?
- a. Invite members of the community to write letters to you.
 - B. KEEP A SUGGESTION BOX IN THE CLINIC.**
 - c. Interview every person leaving your clinic.
 - d. Hold daily meetings at your facility with community members.
39. How can links with the community be continually maintained?
- a. Place a suggestion box in the clinic to collect and implement feedback and ideas from clients.
 - b. Involve community volunteers in the improvement of your facility.
 - C. "B" ONLY**
 - d. "a" and "b"

40. The following are stakeholders

- a. The health facility staff
- b. Clients
- c. Community members
- D. ALL OF THE ABOVE**